FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION CES COMB Number: 3235-0076
Washington, D.C. 20549

Expires:

FORM D

AUG 0 8 20 Expires:
hours per response.....16.00

DATE RECEIVED

NOTICE OF SALE OF SECUR**THOMSON** REUTER PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Shimpaku Capital, L.P.	6PP
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6 Type of Filing: New Filing Amendment) □ ULOE Wall Processing Section
A. BASIC IDENTIFICATION DATA	AUG 04 2008
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Shimpaku Capital, L.P.	Washington, DC 101
Address of Executive Offices (Number and Street, City, State, Zip Code) 210 West Scott, Unit D, Chicago, Illinois 60610	Telephone Number (Including Area Code) (773) 259-4511
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Long-biased hedge fund.	
Type of Business Organization corporation	please specify 08057070
Month Year Actual or Estimated Date of Incorporation or Organization: 05 08 Actual Esti Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	imated e: DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: ✓ Promoter Managing Partner Full Name (Last name first, if individual) Laegeler, Brian W. Business or Residence Address (Number and Street, City, State, Zip Code) 210 West Scott, Unit D, Chicago, Illinois 60610 Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

		_		<u> </u>	В. П	NFORMAT	ION ABOU	T OFFERI	NG				
1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No x		
1,	Answer also in Appendix. Column 2, if filing under ULOE.										_	凹	
2.										\$_50,000.00			
2	2. Describe official assemblished a single unity									Yes	No		
<i>3.</i> 4.	 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, an 									K			
	commis If a pers or state:	sion or sim son to be lis s. list the na	ilar remune ted is an as:	ration for s sociated pe roker or de	solicitation erson or ago caler. If mo	of purchase int of a brok ore than five	ers in conno eer or deale e (5) person	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state sons of such		
Ful	ll Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (N	lumber and	d Street, C	ity. State. Z	Zip Code)						_
Na	me of As	sociated B	roker or De	aler			_·	,			WEY		-
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)						······	☐ Al	l States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	II Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	: Address (Number an	id Street, C	City, State,	Zip Code)					_	
Nai	me of As	sociated Bi	roker or De	aler			<u>-</u>						
Sta	tes in Wh	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	<u> </u>					
	(Check	"All States	s" or check	individual	States)	***************************************		***************************************		***************************************		☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if ind	ividual)		 -							
Bus	siness or	Residence	: Address (1	Number an	id Street, C	City, State, I	Zip Code)						
Nai	me of As	sociated Br	roker or De	aler		*							
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					<u>.</u>	
			s" or check						,		***************************************	□ AI	l States
	AL IL MT RI	IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s	\$
	Equity	s	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	s open-	\$_950,000.00
	Other (Specify)	s ended	\$
	Total		\$ 950,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	•	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	5	\$ 950,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		s 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		s
	Legal Fees	_	\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)		<u> </u>
	Total		s 0.00

L	C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND USE (OF PROCEEDS	
	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C — proceeds to the issuer."		ross	950,000,00 \$
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Pa	ny purpose is not known, furnish an estimate of the payments listed must equal the adjusted g	and	
			Payments to Officers. Directors. & Affiliates	Payments to Others
	Salaries and fees		🗀 \$	S
	Purchase of real estate		\$	s
	Purchase, rental or leasing and installation of ma	schinery		
	and equipment		_	_
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass	tlue of securities involved in this	····· 🔲 🛡	- ⊔³
	issuer pursuant to a merger)		🗀 \$	
	Repayment of indebtedness			
	Working capital		🗍 \$	S
	Other (specify): Purchase of marketable secur		\$	✓ S 950,000.00
	-	· · · · · · · · · · · · · · · · · · ·	_ 	\$
	Column Totals		<u>0.00</u>	S 950,000.00
	Total Payments Listed (column totals added)		_ S_9	50,000.00
		D. FEDERAL SIGNATURE		 -
sig	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to funiformation furnished by the issuer to any non-ac	rnish to the U.S. Securities and Exchange Con	imission, upon writt	ule 505, the following on request of its staff.
Issi	er (Print or Type)	Signature	Date	
Sh	mpaku Capital, L.P.	15-7	7-31-20	08
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)	*	
Bria	n W. Laegeler	Manager of Laegeler Asset Management,	LLC (General Parti	ner)

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ∑

See Appendix, Column 5. for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signapury	Date		
Shimpaku Capital, L.P.	Sin	7-31-2008		
Name (Print or Type)	Title (Print or Type)	·		
Brian W. Laegeler	Manager of Laegeler Asset Management, LLC (General Partner)			

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 3 2 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate Type of investor and to non-accredited offering price explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Yes No Investors **Investors** Yes No State Amount Amount ΑL AK AZAR L.P. Interests CA1 \$200,000.00 X CO CTDE DC FLGA HI 1D 3 ΙL X L.P. Interests \$500,000.0 IN ĪΑ KS KY LA ME MD MA ΜI MN MS

APPENDIX 2 3 4 5 ŀ Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate Type of investor and to non-accredited offering price explanation of investors in State offered in state amount purchased in State waiver granted) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Number of Number of Accredited Non-Accredited No Investors **Investors** Yes No State Yes Amount Amount МО MTNE NVNH NJ NM L.P. Interests X NY 1 \$250,000.0 NC ND OH OK OR PA RI SC SD TN TXUT VT VAWA WVWI

	APPENDIX										
1		2	3		4						
	to non-a investor	d to sell accredited is in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and expl amount purchased in State waiv (Part C-Item 2) (Part			amount purchased in State				
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited			Yes	No		
WY											
PR											

